## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number

09/897731

| CLAIMS AS FILED - PART I (Column 1) (Column 2) |   |   |                                       |                              |                              |                     |         | SMALL ENTITY        |                        | OTHER THAN<br>OR SMALL ENTITY |                     |                        |  |
|--|---|---|---------------------------------------|------------------------------|------------------------------|---------------------|---------|---------------------|------------------------|-------------------------------|---------------------|------------------------|--|
| TOTAL CLAIMS                                   |   |   | 9                                     |                              |                              |                     | ſ       | RATE                | FEE                    |                               | RATE                | FEE                    |  |
| FOR  |   |   | NUMBER FILED                          |                              | NUME                         | BER EXTRA           |         | BASIC FEE           | 355.00                 |                               | BASIC FEE           | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS                        |   |   | 9 minus 20=                           |                              |                              |                     |         |                     |                        |                               |                     |                        |  |
| INDEPENDENT CLAIMS                             |   |   | 7 .                                   |                              |                              |                     |         | X\$ 9=              |                        | OR                            | X\$18=              |                        |  |
| MULTIPLE DEPENDENT CLAIM P                     |   |   | minus 3 =                             |                              |                              |                     | .       | X40=                |                        | OR                            | X80=                |                        |  |
| IVIC   |   | DENT CEANVIT                              | TEOCIVI                               |                              |                              |                     |         | +135=               |                        | OR                            | +270=               |                        |  |
| * If   | the difference  | in column 1 is                            | less than zero, enter "0" in column 2 |                              |                              |                     |         | TOTAL               |                        | OR                            | TOTAL               |                        |  |
|  | C   | Laims as a                                | MENDED                                | MENDED - PART II             |                              |                     |         |                     |                        |                               | OTHER THAN          |                        |  |
| (Column 1)                                     |   |   |                                       |                              | mn 2)<br>IEST                | (Column 3)          | ) (=    | SMALLE              |                        | OR                            | SMALL               |                        |  |
| AMENDMENT A                                    |   | REMAINING<br>AFTER<br>AMENDMENT           | 1 4 6<br>1 4 6<br>4 6                 | NUM<br>PREVI                 | IBER                         | PRESENT<br>EXTRA    |         | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus                                 | **                           |                              | =                   |         | X\$ 9=              |                        | OR                            | X\$18=              |                        |  |
|  | Independent   | *   | Minus                                 | ***                          | T CL AINA                    | ]=                  |         | X40=                |                        | OR                            | X80=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |                                       |                              |                              |                     |         | +135=               |                        | OR                            | +270=               |                        |  |
|  |   |   |                                       |                              |                              |                     |         | TOTAL<br>ADDIT. FEE |                        | OR                            | TOTAL<br>ADDIT. FEE |                        |  |
|  |   | ĺ   | (DDII. 7 EE (                         |                              | . ك                          | ADDI1. 1 EE         |         |                     |                        |                               |                     |                        |  |
| AMENDMENT B                                    |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | NUM<br>PREVI                 | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA    |         | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus                                 | **                           |                              | =                   |         | X\$ 9=              |                        | ÖR                            | X\$18=              |                        |  |
|  | Independent   | *   | Minus                                 | ***                          |                              | =                   |         | X40=                | 3                      |                               | X80=                |                        |  |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                              |                              |                     | ]       |                     |                        | OR                            |                     |                        |  |
|  |   |   |                                       |                              |                              |                     | L       | +135=               | -                      | OR                            | +270=               |                        |  |
|  |   | A   | TOTAL<br>DDIT. FEE                    |                              | OR                           | TOTAL<br>ADDIT. FEE |         |                     |                        |                               |                     |                        |  |
| (Column 1) (Column 2) (Column 3)               |   |   |                                       |                              |                              |                     |         |                     |                        |                               |                     |                        |  |
| AMENDMENT C                                    |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVI<br>PAID | IBER<br>OUSLY                | PRESENT<br>EXTRA    |         | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total   | *   | Minus                                 | **                           |                              | =                   |         | <b>X\$</b> 9=       |                        | OR                            | X\$18=              |                        |  |
| AME  | Independent   | *   | Minus                                 | ***                          |                              | =                   |         | X40=                |                        | OR                            | X80=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   |                                       |                              |                              |                     |         | +135=               |                        |                               |                     |                        |  |
| • 1  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                       |                              |                              |                     |         |                     |                        | OR                            | +270=               |                        |  |
| **   | lf the "Highest Nur   | mber Previously Pa<br>mber Previously Pa  | aid For" IN THIS                      | S SPACE i                    | is less tha                  | n 20, enter "20."   | " A     | TOTAL<br>DDIT. FEE  |                        | OR                            | TOTAL<br>ADDIT. FEE |                        |  |
|  | The "Highest Num  | ber Previously Pai                        | d For" (Total or                      | Independ                     | lent) is the                 | highest numbe       | er four | nd in the app       | ropriate box           | ( in co                       | lumn 1.             |                        |  |